

SUMMARY FORM

COLLECTIVE BARGAINING AGREEMENT PUBLIC SECTOR / NON-POLICE & NON-FIRE

Section I: Agreement Details

Public Employer:	LOWER TOWNSHIP	County:	Cape May
Employee Organization:	RBCREATION AIDES	Employees in Unit:	12
Base Year Contract Term:	1/1/2007	12/31/2011	New Contract Term 1/1/2012
Type of Settlement:	<input type="checkbox"/> Mediated Settlement <input type="checkbox"/> Fact-Finder Recommendation <input checked="" type="checkbox"/> Voluntary Settlement <input type="checkbox"/> Super Condition		

	Column A Base Year - Total Costs (Last Year of Previous agreement)	Column B New Base Year - Total Costs (First Year of Successor agreement)
Section II: Economic		
Item 1	\$116,440	\$121,135
Item 2	\$3,986	\$0
Item 3	\$300	\$1,800
Item 4		
Item 5		
Item 6		
Item 7		
Item 8		
Item 9		
Item 10		
Item 11		
Item 12		
Any additional items list on separate sheet	Additional Items	
Section III: Totals - Sum of costs in each column	<u>\$120,706</u>	<u>\$122,935</u>
	(Total)	(Total)

Section IV: Analysis of new successor agreement

NEW AGREEMENT ANALYSIS

Total Base Year (previous agreement) \$120,706

Effective Date (m/d/yyyy)	1/1/2012	1/1/2013	1/1/2014	1/1/2015	1/1/2016	
Percent Increase	1.85%	-14.64%	15.05%	2.11%	2.07%	
Total cost of increase ..	<u>\$2,228</u>	<u>-\$18,000</u>	<u>\$15,792</u>	<u>\$2,548</u>	<u>\$2,548</u>	
Total base salary (successor agreement)	<u>\$122,935</u>	<u>\$104,935</u>	<u>\$120,727</u>	<u>\$123,275</u>	<u>\$125,822</u>	

Section V: Impact of Settlement - average annual increase over term of agreement

Percentage Impact (average per year over term of agreement) 1.29

Dollar Impact (average per year over term of agreement) \$5,118.00

Section VI

Health Insurance (Indicate costs associated on each line)	Base Year	Year 1
Cost of Health Plan		
Employee Contributions		
Prescription		
Dental		
Vision		

The undersigned certifies that the foregoing figures are true and is aware that if any of the foregoing items are false, s/he is subject to punishment.